| PATENT APPLICATION FEE DETERMINATION RECORD | | | | | | | | | Application or Docket Number | | | |
|---|---|---------------------------------|--|--|-------------------------|-------------------------------|---------------------|---------------------|------------------------------|-------------|---------------------|---------------|
| Effective December 8, 2004 | | | | | | | | | 10/574276 | | | 6 |
| | | CLAIMS A | | FILED - PART I | | | | SMALL ENT | <u> </u> | OR | OTHER T | |
| us. | NATIONAL S | TAGE FEES | (Column | (Column 1) | | Column 2) | 1 | RATE | FEE | / :[| RATE | FEE |
| | IC FEE | | SMALL ENT. | SMALL ENT. = \$ 150 | | E ENT. = \$ 300 | 1 | BASIC FEE | 7 | OR | BASIC FEE | 17/1 |
| EXAMINATION FEE | | | | Satisfies PCT-Article 33(1)- (4) = \$ 50 / \$ 100 | | her situations = 100 / \$ 200 | | EXAM. FEE | -/- | | EXAM, FEE | 271 |
| SEARCH FEE | | | U.S. is ISA = \$50/\$100 ALL other countries = \$200/\$400 | | All oth | her situations = 250 / \$ 500 | | SEARCH FEE | 7 | | SEARCH FEE | 400 |
| FEE | FOR EXTRA SE | PEC. PGS. | | minus 100 = | | / 50 ≐ | 1 | X \$ 125 = | | | X \$ 250 = | |
| | AL CHARGEAB | | 4 min | ∠ minus 20 = | | A | 1 | X \$ 25 =/ | | OR | X \$ 50 = | |
| | EPENDENT CLA | | 9 mi | inus 3 = | | 0 | 1 | X \$ 100= | | OR | X \$ 200 = | |
| L | | DENT CLAIM PRE | ESEKE | | | | 1 | + \$ 180 = | | OR | + \$ 360 = | 22 |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | 4 | TOTAL | | OR | TOTAL | 900 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL E | ENTITY | OR | OTHER 1 SMALL E | |
| <u> </u> | | (Column 1) CLAIMS | | HIGH | | PRESENT | 1 | | ····ADDI- ·· | | RATE | ADDI-" TIONAL |
| ΨΨ | 1 | REMAINING AFTER AMENDMENT | | PREVIO | OUSLY | EXTRA | | RATE | TIONAL FEE | | KAIE | FEE |
| AMENDMENT | Total | • | Minus . | ** | | 8 | | X \$ 25 = | | OR | X \$ 50 = | |
| MEN | Independent | • | Minus | *** | | a . | | X \$ 100 = | <u></u> | OR. | X \$ 200 = | |
| • | FIRST PRESENTATION OF MULTIPLE DEPENDENT CL | | | | CLAIM | |]. | + \$ 180 = | | OR | + \$ 360 = | |
| - | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| 1 | | • | | | | 01 | | | | | | |
| | | (Column 1) | | | ımn 2) HEST | (Column 3) | ٦ | | ADDI- | 1 | | ADDI- |
| 18 | | REMAINING AFTER AMENDMENT | | PREVI | MBER IOUSLY D FOR | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE |
| MEN | Total | • | Minus | ** | | = |] | X \$ 25 = | | OR | X \$ 50 = | |
| AMENDMENT B | Independent | • | Minus | ••• | | = | 1 | X \$ 100 = | | OR | X \$ 200.= | · |
| 4 | | ENTATION OF M | AULTIPLE DEPI | ENDENT | CLAIM | | 1 | +\$ 180 = | | OR | + \$ 360 = | |
| - | | | | TOTAL ADDIT. | | OR | TOTAL ADDIT. FEE | | | | | |
| | | | | | | | | | | - | | |
| | • | | | | | | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "o" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". | | | | | | | | | | | | |
| *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |